

CAMPAIGN TREASURER'S REPORT SUMMARY

(1) Ken Amaro
 Name

(2) 6999 Merrill Rd. STE 2-184
 Address (number and street)

Jacksonville, FL 32277
 City, State, Zip Code

OFFICE USE ONLY
ONLINE SUBMISSION
 [1296700]

Submitted on:
 5/24/2023 12:37:27 (eastern)

Check here if address has changed (3) ID Number: 1120

(4) Check appropriate box(es):

Candidate Office Sought: City Council District 1

Political Committee (PC)

Electioneering Communications Org. (ECO) Check here if PC or ECO has disbanded

Party Executive Committee (PTY) Check here if PTY has disbanded

Independent Expenditure (IE) (also covers an individual making electioneering communications) Check here if no other IE or EC reports will be filed

(5) Report Identifiers

Cover Period: From 3 / 17 / 2023 To 6 / 19 / 2023 Report Type: TRF

Original Amendment Special Election Report

(6) Contributions This Report

Cash & Checks \$, , 0 . 00

Loans \$, , 0 . 00

Total Monetary \$, , 0 . 00

In-Kind \$, , 0 . 00

(7) Expenditures This Report

Monetary Expenditures \$, 25 , 395 . 65

Transfers to Office Account \$, 9 , 657 . 79

Total Monetary \$, 35 , 053 . 44

(8) Other Distributions

\$, , 0 . 00

(9) TOTAL Monetary Contributions To Date

\$, 69 , 980 . 00

(10) TOTAL Monetary Expenditures To Date

\$, 69 , 980 . 00

(11) Certification

It is a first degree misdemeanor for any person to falsify a public record (ss. 839.13, F.S.)

I certify that I have examined this report and it is true, correct, and complete:

(Type name) _____

Individual (only for IE or electioneering comm.) Treasurer Deputy Treasurer

X _____

Signature

(Type name) _____

Candidate Chairperson (only for PC and PTY)

X _____

Signature

CAMPAIGN TREASURER'S REPORT – ITEMIZED CONTRIBUTIONS

(1) Name Ken Amaro (2) I.D. Number 1120

3/17/2023 through 6/19/2023

(3) Cover Period _____ / _____ / _____ through _____ / _____ / _____ (4) Page 1 of 0

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Contributor Type Occupation | | (9) Contribution Type | (10) In-kind Description | (11) Amendment | (12) Amount |
|-------------|--|--|--|-----------------------------|--------------------------------|-------------------|----------------|
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CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ken Amaro

(2) I.D. Number 1120

(3) Cover Period 3/17/2023 through 6/19/2023

(4) Page 1 of 2

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|---------------------------|--|--|----------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| 3/22/2023 // | On Target Messaging LLC , 14286 Beach Blvd. Ste 19-304 Jacksonville, FL 32250 | advertising | MO | | \$17,706.39 |
| 1 | | | | | |
| 3/22/2023 // | Bank of America Corporation , 100 North Tryon Street Charlotte, NC 28255 | bank charge | MO | | \$1.00 |
| 2 | | | | | |
| 4/4/2023 // | On Target Messaging LLC , 14286 Beach Blvd. Ste 19-304 Jacksonville, FL 32250 | consulting | MO | | \$4,893.19 |
| 3 | | | | | |
| 4/4/2023 // | Bank of America Corporation , 100 North Tryon Street Charlotte, NC 28255 | bank charge | MO | | \$1.00 |
| 4 | | | | | |
| 4/18/2023 // | Electioneering Consulting, Inc, 1563 Capital Cir SE #212 Tallahassee, FL 32311 | consulting & quarterly compliance | MO | | \$1,774.65 |
| 5 | | | | | |
| 5/23/2023 // | Electioneering Consulting, Inc, 1563 Capital Cir SE #212 Tallahassee, FL 32311 | shipping | MO | | \$19.42 |
| 6 | | | | | |
| 5/23/2023 // | Duval County Republican Execut, 10111 San Jose Blvd, Suite 6 Jacksonville, FL 32257 | contribution | DP | | \$1,000.00 |
| 7 | | | | | |
| 5/23/2023 // | Councilman Ken Amaro Office Ac, 7841 Feather Oaks Drive Jacksonville, FL 32277 | disposition of funds | TO | | \$9,657.79 |
| 8 | | | | | |

CAMPAIGN TREASURER'S REPORT – ITEMIZED EXPENDITURES

(1) Name Ken Amaro

(2) I.D. Number 1120

(3) Cover Period 3/17/2023 through 6/19/2023

(4) Page 2 of 2

| (5) Date | (7) Full Name (Last, Suffix, First, Middle) Street Address & City, State, Zip Code | (8) Purpose (add office sought if contribution to a candidate) | (9) Expenditure Type | (10) Amendment | (11) Amount |
|---------------------------|---|--|----------------------------|-------------------|----------------|
| (6) Sequence Number | | | | | |
| 5/23/2023 / / | The Florida Theatre Performing, 128 East Forsyth Street Suite 300 Jacksonville, FL 32202 | disposition of funds | DI | | \$500.00 |
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